Reviewer's report

Title: Functional jejunal interposition, a reconstruction procedure, promotes functional outcomes after total gastrectomy

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Reviewer: CHikashi Shibata

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Authors performed a new reconstructive procedure (FJI procedure) after total gastrectomy and studied advantage of this procedure compared to conventional Roux-en-Y reconstruction. In clinical setting, they studied postoperative nutritional status in 79 patients with FJI and 71 patients with Roux-en-Y. They reported that FJI had advantages in terms of PNI score, body weight, hemoglobin, and total protein. They also found that incidence of dumping syndrome, reflux esophagitis, and Roux-en-Y syndrome was decreased in FJI compared to Roux-en-Y. Authors next showed advantage of FJI compared to Roux-en-Y in intestinal transit, inflammation, status of ICC, and apoptosis in dogs which underwent total gastrectomy. I have following criticism for this manuscript.

Major Compulsory Revisions
1: The authors did not describe diagnosis criteria for reflux esophagitis, dumping syndrome, or Roux-en-Y syndrome, and this is a very crucial problem.
2: Number of patients in each group is not at all shown in Tables 2 and 3.
3: Is data for Table 4 for 3 months after surgery or 12 months after surgery?
4: About 80% of patients are Stage III~IV in this study. Prognosis for patients with Stage IV is expected grim, and authors should describe prognosis of those patients with Stage III~IV. With this context, data for Table 3 should be shown in each Stage separately. It is hard to believe to me that body weight increases for 4.5 kg in patients whose Stage is III or IV in about 80%.
5: Authors should describe mortality and morbidity other than dumping syndrome, reflux esophagitis, or Roux-en-Y syndrome. I would like to know incidence of anastomotic leakage, pancreatic fistula, or other complications.
6: Number of used dogs is not shown.
7: Although the authors stated that they took jejunal specimen 5 cm oral and anal to the duodenojejunal anastomosis in FJI at the bottom of Page 7, the same thing is not described for Roux-en-Y.
8: Data in Figures 2-4 needs to be quantitated with number of dogs used. Just showing those pictures could not be scientific evidence.
9: Although authors stated that Roux-en-Y syndrome is frequently observed after total gastrectomy with reference NO. 19, this article is on Roux-en-Y syndrome after partial, but not total, gastrectomy.
Minor Essential Revisions

1: Line 5, page 4, “are focused on ” should be changed to “focused on.”

2: Line 2, second paragraph, page 6, “Reflux Esophagitis, Dumping Syndrome” should be changed “reflux esophagitis, dumping syndrome.”

3: Table 3, “Hemoglobin increase” and “Total protein increase” should be changed to “Hemoglobin” and “Total protein.”

4: Starting sentence with Arabic numerals should be avoided. For example, line 7 in abstract, “71 patients” should be changed to “Seventy-one patients.”

5: Some sentences in Results section should be moved on to Introduction or Discussion section. For example, third paragraph in page 7, “Our studies from --- 7 beagles with Roux-en-Y,” lines 3-1 from the bottom in page 10 ~ lines 1-4 in page 11, “Intestinal surgery-induced dysmotility --- detected ICC in the intestine,” lines 3-1 from the bottom in page 11 ~ line 1 in page 12, “The epithelium is --- in intestinal inflammation [11],” all these should not be placed in Results section.

6: I cannot understand which picture comes from FJI, Roux-en-Y, or control in Figures 2 and 4. I cannot see A, B, or C in actual Figure 3.

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests.